## **Application or Docket Number**

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

098720X7

CLAIMS AS FILED								SMALL ENTITY			OTHER	
			(Column	1)	(Colum	n 2)	]	YPE _		OR.	SMALL	PILLIN
TOTAL CLAIMS			۶.	··· 8				RATE	FEE	-	RATE	FEE
FO	A 5		NUMBER F	ILED	NUMBE	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 7.10.00
TOTAL CHARGEABLE CLAIMS			<b>⊗</b> minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			6 _ minus 3 =		3			X40=	120	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=	14 1	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in colum								TOTAL	425	OR	TOTAL	
CLAIMS AS AMENDED - PART II								: ,	. ,		OTHER	THAN
(Column 1) (Column 2) (Column 3)							_	SMALL	ENTITY	OR	SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	3. 2.	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQN	Total	• 5	Minus	- )	,o	<b>=</b>		X\$ 9=	S	ÓR	X\$18=	
ME	Independent	• 3	Minus	•••	3	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J∙	+135=		OR	+270=	1
					• • •	j	· . •	TOTAL		OR	TOTAL	
ADDITIFEE											AUDII. FEE	
		(Column 1)			IEST	COMMITTO	ጎ 1	· ·	ADDI-	i	···	ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	•	RATE	TIONAL FEE
	Total	•	Minus	. ** .				X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***		• •	4	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		_	+135=		OR	+270=	
										OR	TOTAL	
AUDIT. PEE Landing AUDIT. PEELLanding												
<b> </b>	1	(Column 1) CLAIMS			mn 2) Hest	(Column 3	٦.			•		T
AMENDMENT C		REMAINING AFTER AMENDMENT		NUI PREV	MBER IOUSLY DFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž.	Total	•	Minus	••		5		X\$ 9=		<b>QR</b>	X\$18=	
	Independent	٠	Minus	•••		=	4	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		1
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.										OR	L 7074	ļ
"If the entry in column 1 is less than the entry in column 2, write "I in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEEOR												
"	"It the "Highest Nu The "Highest Nur	umber Previously I mber Previously P	raid For (Total o	is spact ir Indepen	: is less thi ident) is the	ur 3, enter 3. e highest num	ber fo	ound in the ap	ppropriate b	ox in c	olumn 1.	